## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/

CLAIMS

FILING DATE

APPLICANT(S)

CLAIMS

U.S. DEPARTMENT of COMMERCE

	C					
	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2				$\vdash$		
3	-					
5		-				
6		1				
7						
8						
9				7	1	
10						
11		<u> </u>				
12 13						
14						
15						
16						
17						
18						
19						
20		<u> </u>		ļ		
21						
22 23						-
24					•	<b></b>
25		<u> </u>				
26	****		-			
27						
28		ļ				ļ
29						
30 31						
32						-
33						
34						
35		) — — IV		7-1-14	3 - 5 - 5 - 5	1-200-240
36						
37						
38						ļ
39 40				<b></b>		<del>                                     </del>
41						<del>                                     </del>
42						
43						
44						
45		$\sqcup$				ļ
46		ļ		ļ		ļ
47 48		$\vdash$		<del>                                     </del>		<del>  </del>
48		$\vdash$		-		
50						
TOTAL			2			
IND.		」 ▼	1	」 ▼		」 ▼
TOTAL DEP.		<b>+</b>	3	<b>+</b>		+
TOTAL CLAIMS			5	1000 A		
-						

PTO - 1360 (REV. 11/04)